PTO/SB/17 (06-07)
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Under the Paperwork Redu	respond to a collection of information unless it displays a valid OMB control number								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2007				Complete if Known					
						10/705,195-Conf. #5787			
						November 10, 2003			
						Volker BUTTCHER			
						B. T. Page			
Applicant claims small entity status. See 37 CFR 1.27				7 III OTIK		1638			
TOTAL AMOUNT OF PAYMENT (\$		(\$) 5,850.00		Attorney Docket No.		0147-0253P			
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION									
1. BASIC FILING, SEARCH	I, AND EXA	MINATION FEE	s						
	FILIN	NG FEES	SEA	ARCH FEES	EXAMI	NATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Foos	Paid (\$)	
Utility	300	150	500	250	200	100	1 663	raiu (φ)	
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	000	0			
2. EXCESS CLAIM FEES	200	100	U	U	U	U		O	
Fee Description							Fee (\$)	Small Entity Fee (\$)	
Each claim over 20 (including Reissues)							50	25	
Each independent claim over 3 (including Reissues)							200	100	
Multiple dependent claims							360	180	
				aid (\$)	М	ultiple Depende	nt Claims		
			50.00	Fee (\$)			Fee Paid (\$)		
HP = highest number of total clai	ms paid for, if g	reater than 20.							
Indep. Claims				aid (\$)				_	
) x	=							
HP = highest number of independ	dent claims paid	d for, if greater than	3.						
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50									
sheets or fraction there	52(e)), the	IS C 41(a)(1)(Tee due	8 15 \$250 (\$125 fo 87 CFR 1 16(c)	or small ei	ntity) for each ad	ditional 5	0	
	tra Sheets				tion thoron	f Eco (\$)	Foo	Paid (\$)	
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) 100 = /50 = (round up to a whole number) x =								raiu (φ)	
4. OTHER FEE(S)								Paid (\$)	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge):									
SUBMITTED BY	//// /								
Signature		132		Registration No. (Attorney/Agent)	30,330	Telephone	(858) 79	2-8855	
Name (Print/Type) Leonard R. Svensson				Anomey/Agent)	,	Date	July 9,		